

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Cynthia Chinn
2633 South 9th Street
Ironton, OH 45638

COMPLETE THIS SECTION ON DELIVERY

A. Signature

☒ X☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type

☐ Certified Mail☐ Express Mail☐ Registered☐ Return Receipt for Merchandise☐ Insured Mail☐ C.O.D.4. Restricted Delivery ☐ Yes

2. Article Number

(Transfer from service label)

7009 2820 0003 5799 7565

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

11-177
SSB #11